

BAKER BOTTS LLP



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JCO4 Rec'd PCT/PTO 09 MAY 2001

09/807,663

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Amdt. Trans.
PATENT

Our File No.: A32011-A-PCT-USA - 072448.0262

Date: May 4, 2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5620

In re Application of : Garcia et al.

Serial No. : 09/807,663 Examiner :

Filed : April 16, 2001 Art Unit :

For : IMMOBILIZED SILVER IMMUNOASSAY SYSTEM

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

1. ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
2. ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
3. ☒ No additional fee is required.

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on May 4, 2001.

Attorney Name Marta E. Delsignore

Registration No. 32,689

Signature Marta E. Delsignore

Date of Signature May 4, 2001

The fee has been calculated as shown below:

Claims remaining after amendt. (Col. 1)		Highest No. Prev. Paid for (Col. 2)		Present extra (Col. 3)	<u>SMALL ENTITY</u>			<u>OTHER THAN A SMALL ENTITY</u>		
					<u>RATE</u>	<u>FEE</u>	or	<u>RATE</u>	<u>FEE</u>	
Total	*	Minus **	=	0	x	9 =	\$0	or	x	18 = \$0
Ind.	*	Minus ***	=	0	x	40 =	\$0	or	x	80 = \$0
() First Presentation of Multiple Dependent Claim					+	135 =		or	+	270 =
TOTAL ADDITIONAL FEE						=	\$0	or	TOTAL	= \$0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. prev. paid for" in this space is less than 3, write "3" in this space.

4.(a) ☐ An Extension of Time to respond to the PTO communication dated is hereby requested. The required fee, indicated below, is enclosed herewith.

Extension for response (check only one):

	<u>SMALL ENTITY</u>	<u>OTHER THAN A SMALL ENTITY</u>
Within first month	<input type="checkbox"/> \$ 55	<input type="checkbox"/> \$ 110
Within second month	<input type="checkbox"/> 195	<input type="checkbox"/> 390
Within third month	<input type="checkbox"/> 445	<input type="checkbox"/> 890
Within fourth month	<input type="checkbox"/> 695	<input type="checkbox"/> 1,390

(check and complete the next item, if applicable)

☐ An extension for months has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$.

or

(b) ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

5. ☐ Please charge our Deposit Account No. 02-4377 in the amount of \$. Two copies of this sheet are enclosed.

6. ☐ A check in the amount of \$ is attached.

7. [X]

The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 and/or 37 CFR 1.17 associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.

BAKER BOTTS L.L.P.

By Marta E. Delsignore
Marta E. Delsignore

PTO Registration No. 32,689

Enclosures